PTO/SB/17 (10-08)
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Under the Pa	respond to a collection of information unless it displays a valid OMB control number							
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2009				Complete if Known				
				/ ipplication (tarribe)		10/588,754-Conf. #2942		
						February 2, 2007		
						Jalaj ARORA		
				Examiner Name N		Not Yet Assigned		
Applicant claims small entity status. See 37 CFR 1.27			7	Art Unit		1626		
TOTAL AMOUNT OF PAYMENT (\$) 1,730.00		00	Attorney Docket No. 5		5999-0525PUS3			
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
x Charge any additional fee(s) or underpayments of x Credit any overpayments								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
	•	LING FEES	_	ARCH FEES	EXAMI	NATION FEES		
l	- 4	Small Entity	- 4	Small Entity	- (4)	Small Entity		D-1-1 (A)
Application Ty			Fee (\$		Fee (\$)		Fees	Paid (\$)
Utility	330	165	540	270	220	110		
Design	220	110	100	50	140	70		
Plant	220	110	330	165	170	85		
Reissue	330	165	540	270	650	325		
Provisional	220	110	0	0	0	0		
2. EXCESS CLAIM FEES							F (¢)	Small Entity Fee (\$)
<u>ree Description</u>								
Each claim over 20 (including Reissues)							52	26
Each independent claim over 3 (including Reissues)							220	110
Multiple dependent claims				D-1-1 (#)		Mariatical a Dominia	390	195
Total Claims	Extra Claims			ee Paid (\$)		Multiple Depend		
- or HP = x = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20.								
Indep. Claims	Extra Claims	s Fee (\$)	F	ee Paid (\$)				
- or HP = x =				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
1							_	D : 1 (A)
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)							Fee	Paid (\$)
100 = /50 = (round up to a whole number) x =								D : 1 (t)
4. OTHER FEE(S) Fees Paid (\$) New Freshick Specification S120 for (no small entitle discount)								
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): 1254 Extension for response within fourth month 1,730.00								
SUBMITTED BY						·····		
Signature Du J			Registration No. (Attorney/Agent)			05-8000		
Name (Print/Type) Eugene T. Perez						Date	January	15, 2010